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INEBRIETY—HOW TREATED AT THE ALBANY PENITENTIARY.

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(Read before the American Association for the
Cure of Inebriates.)

The first annual report of the managers of the New York State Inebriate Asylum contains this significant statement: "Since 1848 there have been received at the Albany penitentiary, under commitment, 24,590 persons, of whom 21,057 confess to habits of inebriety." Inquiry into the statistics of this institution reveals many additional suggestive facts, of great interest, though not particularly new.

The Albany penitentiary has been in existence twenty-seven years. Its reputation has become national, from its strict discipline and excellent financial management. Only one convict has ever escaped, and the earnings of the prisoners over all expenses have been \$243,901; an average of \$9033 per year.

Ninety per cent. of the prisoners are sent here for a less time than one year, making the financial success of the institution more difficult and anomalous, compared with other institutions of the kind. The majority of prisoners confined here are from Albany city and county, with the exception of government prisoners, who are largely from the south. The statistics of last year indicate that of the 1614 persons committed, 1245 were charged with misdemeanors, including 693 sent for drunkenness and 221 for disorderly conduct following from inebriety.

During the twenty-seven years of this institution, there have been 12,285 persons committed for drunkenness, and 4590 for disorderly conduct. Of the 24,590 committed since the institution was founded, 21,057 have confessed to being inebriates, probably because the offences with which they have been charged, and the facts of their history, made all denial useless. But of the number who claim to be temperate, a large proportion are found to be dipsomaniacs and chronic inebriates. According to the records of last year, 303 out of 1614 declared themselves temperate. Of this number, fifty-six were found to be dipsomaniacs, and over one hundred had a history of drunkenness, leaving only nine per cent. temperate. With these data, we have the startling fact that only 2213 temperate prisoners have been committed during the twenty-seven years, and that 22,377 inebriates have been received for punishment.

The most common phase of inebriety seen among the prisoners is delirium tremens. Three general classes have so far been noticed: Those who have all the premonitory symptoms of this affection; those who have a full development of the disease; and those who come here debilitated, and after a few days develop a well marked attack.

The first class includes the petty thieves and perpetrators of crime against public decency, who have been persistently drinking, eating little, and subject to much exposure. They are generally those whose drinking is controlled by their ability to purchase liquor. They have cowardly, low dispositions, and are so agitated after arrest, in fear of the law, that this, aggravated by the depression following an unpleasant

ant change of circumstances, merges into delirium.

The second class comprises those who, when inebriated, are wild and maniacal, or filled with delusions. They are committed for assault and graver crimes against persons, and not often for drunkenness. Frequently inebriety has existed for some time, and yet has not been recognized, because the more common and prominent symptoms were obscure. It is the opinion here that many of the worst crimes are committed by this class in these obscure paroxysms, where the reason and will co-ordination is more affected than the motory and sensitive system. Many of these cases are not recognized until the prisoner is sent to the jail or penitentiary; and here he will sign his name correctly, and walk firmly for a time, then give way to the most insane fancies and impulses. These symptoms are generally thought to be assumed, to mitigate punishment, hence not studied. Such cases are those of persons who have been drinking persistently for months, and, perhaps, have no occupation.

The third class comprises those who are committed for crimes against both person and property, of a minor nature. They are usually much debilitated by debauch, and seem to suffer from restraint and sensations of fear and alarm. A few days later they develop a full attack of delirium. Most of these cases are found to occur among inebriates of recent development.

These divisions of delirium tremens may be recognized, as a rule, in nearly all cases of criminal inebriates. An unusual exception is now under treatment, where the prisoner worked thirty-eight days after admission, in apparent health, and then broke out into a violent attack, accompanied with great prostration. It is thought here that the restraint of the surroundings, with fear, prevented the earlier development of the affection in this case.

In the medical treatment of delirium tremens, hydrate chloral heroically administered is found to be the most valuable of prescriptions. Nutritious food, bathing and saline drinks, are also resorted to freely. The first thing, after the delirium has in a measure subsided, is to get the patient employed; to occupy his mind. If he is in the hospital, and cannot leave it, he is employed sorting and covering books, or labeling packages. If he can go out, some work is given him which requires his undivided attention.

With the first symptoms of the return of the paroxysm, chloral is given, and after a rest of a few hours, work is enjoined again. The object sought is to break up the old chain of thought, and to infuse a sense of new responsibility and duties into the mind. Those who can be employed after the first day, are placed among the other prisoners, and kept steadily at work. The first class, after a day or more, are placed in the shoe or chair shops, and kept there, whether employed or not. The second class are treated with rest and quiet in the hospital for a few days, and then they are held strictly accountable for all violations of rules. The third class are placed under vigorous restraint at once.

This constitutes the general course of treatment. The result is that those employed recover rapidly, and but few cases are developed after the prisoners have come here. Those cases which remain in the hospital or cell until complete recovery takes place average from ten to twenty days longer than those treated by the plan last mentioned. Over twelve hundred cases of delirium tremens are noted on the records, with only forty-three deaths, showing how far this general plan has been successful. Within the last ten years the number of cases has fallen off over one-half, the reason assigned being that a better medical knowledge causes these persons to be sent to asylums before they reach the stage of crime and delirium.

It is the opinion here that the lowest criminals are rarely if ever attacked with delirium tremens; that this affection always implies a higher nervous organization than ordinary; also that some men have constitutions that will not manifest alcoholic disease by delirium tremens, but in coma and stupidity; and that the higher the grade of sensibility, the more delusive and delirious will be the manifestations of alcoholic excess. Not a single case of this affection has been noticed in the sixteen hundred colored men and women confined here, although they were, with few exceptions, inebriates.

Another form of inebriety commonly seen here is dipsomania or paroxysmal drinking. As a rule the victims are confined for petty crime, such as larceny, vagrancy, disorderly conduct and drunkenness. Often they are old offenders, having been the rounds of state prisons and penal institutions. Crime, with them, is always a means to gratify their pas-

sion for drinking. Their will power is partially destroyed, and they live a life of struggles and failures to reform. After commitment here, for a few days they develop paroxysms of moroseness and stubbornness, requiring vigorous restraint to manage. In a short time these spasms disappear, and they become cheerful and work steadily. In a few days or weeks they recur again, attended with loss of appetite, and sometimes mental disturbance, bordering on mania, or the victims are filled with delusions which cause fear and anger. If the prisoner is weak, a dose of chloral is given, and rest permitted; but, if not, decisive discipline, to the extent of placing him in a dungeon for a few hours, is found to have an excellent effect. After one or two attacks their paroxysms grow less violent and finally disappear altogether. Prompt punishment likewise has a wholesome effect on the minds of others in like condition. It happens that occasionally a number of dipsomaniacs are in one gang, and should one become intractable, and not be punished, the example would be contagious. No disorganization would follow, but very little work could be accomplished; but place one or more in the dungeon and no further trouble would be manifested. The atmosphere of restraint and discipline over minds long given to morbid passions and impulses seems to act like a tonic, and in a measure supply the place of their lost will power.

As a curative measure, prompt punishment is administered to all dipsomaniacs who show any disposition to violate the rules. The majority of dipsomaniacs are actually striving to reform, and welcome the aid of restraint as the only means by which they can recover. Those of this class who have been here before, and are about to be returned to some prison, urge that they may be sent here, as a favor, feeling that through this plan reform is possible. From twenty to forty come here every year, bringing their commitment papers, and want the restraint and protection which this place affords. A remarkable instance is that of a man of wealth, who has appeared three times in seven years, with his own commitment papers, under a fictitious name, and was locked up with other prisoners, serving respectively ninety, thirty, and sixty days, working hard, and going out each time with renewed courage and hope. Another case is that of a prominent member of the Albany bar, who is a dipsomaniac, and has

been sent here for the benefit of this sharp military restraint. This man has tried other institutions or asylums, and is now committed here as a last resort.

It is the opinion of the superintendent and physician that a large proportion of the dipsomaniacs may be cured by extending their term of service to two or three years. In this time they would have contracted industrious habits, and the system would have become fortified against temptation.

Another class of inebriates that are very common are called chronic or habitual drunkards. They include nearly all the blacks, a large proportion of the women, and the older prisoners, consisting of those who drink always and upon every opportunity. They are broken down mentally and physically, and have but little moral force. They bear confinement, as a change of surroundings and work, not unpleasantly, and are indifferent about being returned to prison. They are seldom dipsomaniacs, or afflicted with delirium tremens, but seem to be the lowest grade of criminals as well as of physical and mental organizations. They require but little restraint, and are easily overawed by the surroundings. Frequently this class are afflicted with a low kind of nervous fever, which appears after admission, as the result of exposure and debauch. If the system is very much debilitated, phthisis comes on, and generally terminates fatally. Should they rally they continue to improve steadily during the period of confinement. This class fill up the almshouses and hospitals, and are the least hopeful of any. They are truly the parasites of society. The principle of treatment is extreme cleanliness and steady work. With proper management they are made to more than earn their living, and should be confined for life, where they could be producers always.

The women who have been confined here number over 6000, and are nearly all inebriates. The largest class seem to be habitual drunkards; some are dipsomaniacs, and occasionally cases of delirium tremens appear in the first stage. They are all more or less prostrated with various complications of disease, and have low forms of exhaustive fever for a few days after entering. If suffering from delirium tremens they require more careful nursing, and present a more aggravated type of symptoms, but with good treatment convalesce rapidly. They are easily depressed when, by any accident, their usual work is

stopped for a few days, obliging them to wait in the cells. At such times the inebriates are thrown into a nervous fever, with tremblings and exhaustion; and the return of the work restores them at once.

The feminine dipsomaniacs differ but little from the men, only that they require less restraint, and seem satisfied if they can have occupation of body and mind. In the management of inebriates among women, employment is of the first importance; and when the work of caning chairs or shoe-binding is interrupted, other business must be improvised, as confinement and idleness make restraint and management difficult.

It is observed that dipsomaniacs among women remain so, and seldom become habitual drunkards. The regularity and quiet of prison life is the nearest approach to a true home they have, and hence it is an excellent *regimen*, by which they recruit rapidly.

The blacks of both sexes confined here, numbering over 1600, have been inebriates, with few exceptions. The form of inebriety most frequently seen in them is dipsomania. Some of them are very difficult to manage, and when the paroxysm comes on require sharp punishment in the dungeon. They forget readily and often require a renewal of the discipline when the paroxysm returns. They work well and seem to improve under exact military restraint, and also decline rapidly in the cells in idleness. As criminals and inebriates they appear to be victims of circumstances more than all others.

No record of reform among the negroes has been made in this institution. They seem to belong to the hopeless class, who, although in the early stages of crime or drunkenness, go precipitately downward, despite all efforts to rescue them. As before remarked, not a case of delirium tremens has been noticed among all those sent here. The nearest approach is a low, exhaustive fever, which is sometimes marked by transient tremblings of the extremities. They are frequently victims of phthisis, and have less vigor of constitution than white persons, to resist disease.

The class of prisoners sent here are generally of low, defective mental organism, without education, and over fifty per cent. are of foreign birth. From records lately begun among the inebriates, it is found that they suffer largely from inherited inebriety. Of this class an old

writer has said: "They are bundles of vicious influences, transmitted and intensified, with no just perception of legal or moral rights." And yet such persons, when they recognize the power of restraint, obey with promptness and alacrity.

Many of the prisoners come and go year after year, with curious regularity, being each time committed for nearly the same offence. One old man has been sentenced thirty-four times for drunkenness and disorderly conduct. Another has been here nearly all the time for twelve years, serving out one short sentence after another. Others who are dipsomaniacs manage to keep here year after year, and allege that they dare not trust themselves away. This class are made to more than earn their living, and are kept at work without the building, on the grounds.

The mortality record is of interest, because it exhibits so many cases of phthisis, or consumption. Over four-fifths of all the deaths are from this disease. A large proportion of those who died from it were committed for drunkenness and disorderly conduct. This seems to be the particular disease which follows inebriety, and is noted for its sudden and rapid course.

Opium eating is occasionally seen among the prisoners, and is found in connection with dipsomaniacs of the better class. Two cases of unusual interest have occurred lately. Both victims were women, and were distinguished by a wild, uncontrollable mania, which could only be quieted by a grain or more of opium. This mania came on in paroxysms at intervals of three or four weeks, resisting all treatment except by this drug, and was not under the control of the patient's will. The women served out their time with no improvement, and eventually went to an insane asylum.

The superintendent and physician consider that inebriety brings out the baser qualities of character in every man, and discovers what his natural predilections may be. They also consider it to be a disease of both mental and physical powers, requiring moral and physical treatment. The basis of the treatment is to guide and control the weakened will power, and make it subservient to that of the physician or person in charge. Then the system can be strengthened, and recovery is possible.

The cases of permanent recovery and reform among the prisoners have been rapidly in-

creasing. The chaplain and superintendent are in constant receipt of letters from old prisoners, thanking them for favors, and reporting thorough reform and desire for a purer life. Many of the prisoners reside in the neighborhood, and their history can be readily followed up. These and other sources of information give reason for supposing that nearly ten per cent. of all the released prisoners are thoroughly reformed. Of these the inebriates comprise the largest class. In many instances confirmed drunkards have been cured, and have remained so up to the present day.

The managers of this institution seek to employ all its inmates and make them pay their expenses, and through this means develop at least habits of industry. Food, ample in variety and quality, is given; books and schooling are the reward of good conduct. A large hospital furnishes good nursing to the sick, and the utmost regularity, cleanliness and industry are enforced. Kindness and firmness, with strict accountability as to the literal fulfillment of every duty, characterize the institution.

The most common punishment is the dungeon, with ball and chain, and a bread and water diet. Inebriates are found to be particularly sensitive to this punishment. They seem to dread silence and darkness. A peculiar irritative depression seems to take sharp hold of the imagination.

Strong, stubborn criminals have been taken out of the dungeon bathed in the perspiration of fear. The dipsomaniac seems more affected by punishment than the habitual drunkard.

The paroxysms of the inebriate are readily overcome by the means indicated, and a hint that he will return to the dungeon often quiets a recurring attack. It acts as a powerful stimulus to the feeble will to rouse itself and control the diseased longings.

A summary of the most important facts, which seem confirmed by statistics and observation in this institution, may be given as follows:

1. Experience indicates that inebriates of all grades can be made producers, and to more than earn their cost of living.
2. Whether curable or not, in the full meaning of the word, they can all be reformed, benefited, and made industrious for a time; a positive gain to themselves and the world.
3. The diseased will and physical force of the inebriate must, for the best results, be guided and controlled by the normal reason of another.

4. As in other diseases where perfect obedience to the dicta of the physician is absolutely essential, so in inebriety, submission, restraint and faith must constitute the first elements of treatment.

5. The sharp discipline of prison life is particularly fitted to strengthen and develop the feeble impulses and to control the diseased longings, in which consists the beginning of true reform.

6. Labor of body and mind, in a moderate degree, is a powerful aid in breaking up the old channel of thoughts, and giving the mind new responsibilities.

7. The experience and success of this institution, among the worst and least hopeful of patients, founded on two principles, military discipline and occupation of body and mind, indicate the most hopeful promise of future results.

8. The hints embodied in these facts, if carried out practically in an asylum, would be a clearer literal answer than is usually given to the oft-repeated question, "Can you really cure a drunkard?"

MEDICAL SOCIETIES.

PROCEEDINGS OF THE AMERICAN PHARMACEUTICAL ASSOCIATION.

The American Pharmaceutical Association held its twenty-third annual session at Boston, during the week ending September 11th. Representatives were present from all parts of the country, and from Canada, and a vast amount of practical work was accomplished, of interest to the medical profession, as well as to the pharmacist. The first session was held on Tuesday afternoon, September 7th, at Odd Fellows' Hall, in that city.

The officers of the Association were the following:—President, C. Lewis Diehl, of Louisville. Vice Presidents, Joseph Roberts, of Baltimore; Wm. T. Wenzell, of San Francisco; Augustus R. Bayley, of Cambridgeport, Mass. Treasurer, Charles A. Tufts, of Dover, N. H. Permanent Secretary, John M. Maisch, of Philadelphia. Reporter on Progress of Pharmacy, C. Lewis Diehl of Louisville. Local Secretary, Samuel A. D. Sheppard, of Boston.

After the usual preliminary business, such as the appointment of a committee on credentials, etc., the president read his annual address. He alluded to the great number of scientific experimentalists who were at work, each apparently pursuing a different course, yet all meeting at last; to the contributions to science made by pharmacists; to the change which had taken

place during a few years past, by which the pharmacist is no longer dependent upon his own resources for his chemicals, but on commerce and recent improved chemical methods of preparation of drugs, and can now devote more time to the determination of the purity of his purchases. He called attention to those important remedies of modern employment, jaborandi, salicylic acid, and digitaline. He referred to the powerful diaphoretic and sialagogue properties of jaborandi, and to the difficulty of getting accurate chemical accounts of its composition. As it appears in the market, it consists of leaves resembling the common bay leaf, and when chewed, produces a strong flow of saliva. It has been found to contain a volatile oil and an alkaloid, the latter being the active principle.

There were three distinct periods in the history of digitaline and other derivatives of digitalis. By the late experiments of Kossman, it appears that, as digitaline exists in the drug, it is an uncrystallizable principle, freely soluble in water, and readily changed by the action of water, acids or alkalies; and consequently, as it is obtained from the dry drug, it is partly changed, being converted into a crystalline modification, insoluble in water. Both the crystallized and uncrystallized digitaline are active preparations.

Salicylic acid may now be obtained artificially. It differs from carbolic acid in containing two additional equivalents of carbonic acid, and the problem to be solved was, how to add those two equivalents of carbonic acid to carbolic acid. This was effected by heating carbolate of sodium, in a perfectly dusty and dry state, to a certain temperature, and passing carbonic acid through the mixture. It is then readily purified, and found to be identical with the salicylic acid obtained from wintergreen.

The address closed by recommending certain alterations in the constitution, and that a committee be formed, to whom the question of publishing papers should be referred, such committee to have power to refer an objectionable article back to the author, with suggestions for its modification, and that the committees on adulterations and sophistications, and on the drug market, be united.

The Committee on Credentials then reported the names of members present as representatives of the various pharmaceutical colleges and associations; and the Executive Committee suggested the names of more than a hundred candidates for membership, who were elected en masse.

Among these was Prof. S. P. Sharples, consulting chemist and State assayer, Boston, and a question was raised whether professor Sharples came within the definition of a teacher of chemistry specially interested in, pharmacy. He was not connected with any college of pharmacy, but was Professor of chemistry in the Boston Dental College, and had been a teacher in the Lawrence Scientific School, and other educational institutions. The president decid-

ing that he was constitutionally eligible, he was balloted for and elected.

A nominating committee to suggest the names of officers for the ensuing year was next appointed, as well as a committee on specimens, and one to consider and report upon the suggestions contained in the president's address.

The second session was held Wednesday morning, when the following names of officers for the ensuing year were reported, all of whom were elected:—President, Prof. George F. H. Markoe, of Boston. Vice Presidents, Fred. Hoffman, of New York; T. Roberts Baker, of Richmond; C. F. G. Meyer, of St. Louis. Treasurer, Charles A. Tufts, of Dover, N. H. Permanent Secretary, Prof. John M. Maisch, of Philadelphia. Reporter on Progress of Pharmacy, C. Lewis Diehl, of Louisville, Ky. Executive committee, George W. Kennedy, Pottsville, Pa.; Joseph L. Lemberger, Lebanon, Pa.; William M. McIntyre, Philadelphia; Charles A. Heintzsch, Lancaster, Pa.; John M. Maisch, permanent secretary, *ex-officio*. Committee on Papers and Queries, William Saunders, Ontario, Can.; Emil Schaffer, Louisville, Ky.; James H. Taylor, New York. Business Committee, Jacob D. Wells, Cincinnati; Paul Balluff, New York city; William C. Bakes, Philadelphia.

The report of the Executive Committee stated that, having been instructed to publish a portrait of a distinguished deceased member in each volume, they had procured an engraving of the late Prof. William Procter, Jr., of Philadelphia, for that of 1847, and steps had been taken to embellish the next volume with a portrait of the late Prof. Edward Parrish. Since the organization of the society there had been a total membership of 1697; lost by death, 136; dropped for various causes, 477; resigned, 101, leaving a balance of 983. The total number of honorary members was thirty, of whom ten had died. The report then closed with brief obituary notices of the members who had deceased during the year.

After a short address of thanks for the honor of his election, the president elect took the chair. Prof. John M. Maisch, Permanent Secretary, then read his annual report.

This Association, he stated, had extended an invitation to the Fifth International Congress to meet in Philadelphia, in 1876, which was laid before that body at its meeting in St. Petersburg, but no decision had been arrived at, the selection of time and place of meeting being in the hands of the executive committee of that organization. The congress expressed itself, by resolution, in favor of meeting in London, England, and several speakers advocated an interval of five years before another meeting. After the adjournment of the international congress the members met and divided among themselves a draft of an international pharmacopœia, prepared by the Paris Pharmaceutical Society, and agreed upon the principles which should guide the review and completion of the draft. It was decided that evaporation *in vacuo* should not be directed in the preparation of extracts; that

the fluid extracts of the United States Pharmacopoeia should be critically examined: and that the temperature for taking the specific gravity of all liquids should be uniformly 59° Fahrenheit. The critical review of the submitted draft would be completed by December, when it was to be multiplied and communicated to the various pharmaceutical societies. At the meeting in Louisville the Association decided to participate in this undertaking, and correspondence to that end was now in progress. A cordial invitation had been extended to the pharmacists of all nations to meet with the A. P. A. in 1876. The secretary recommended that the Association communicate directly with the various national and local societies of foreign countries upon this subject. The Philadelphia College of Pharmacy had invited the members of foreign societies to make the college building their headquarters, and proposed to engage proper persons to give needful and useful information to strangers. The secretary recommended that a committee of arrangements be appointed, with power to act at the Centennial exposition; pharmaceutical and allied products from all parts of the world would be exhibited, so that no exhibition by the Society was desirable. The secretary read a paper on American Pharmacy and its Relations to Public Health, before the American Public Health Association, in Philadelphia, in November, 1874, and had discussed therein the importance of pharmacy to the public welfare and health, the large amount of spurious and adulterated drugs and preparations formerly imported into this country, and the salutary effect of the drug law; also home adulterations, patent medicines, and measures to decrease their sale, and other questions of importance to the pharmacist and the public; urging particularly the necessity of the enactment of laws regulating and restricting the sale of drugs and medicines to properly educated pharmacists.

The Committee on Unofficial Formulæ, whose duty it is to collect such formulæ for elixirs, extracts, etc., as are in use, but are not made official in the United States Pharmacopoeia, made a report; the portion relating to elixirs was referred to the Committee on Elixirs. The Treasurer reported a balance of \$873.16, and that the principal disbursement in 1874 was for the publication of the bulky volume of over 1000 pages of the Proceedings. 122 additional candidates for membership were elected.

A very important report was then read by Dr. A. W. Miller, of Philadelphia, on Adulterations and Sophistications. Advertisements had been inserted in the pharmaceutical journals requesting information of adulterations and sophistications of drugs, chemicals, and kindred articles. Some of the important adulterations had been brought to the notice of the pharmaceutical meetings of the Philadelphia College of Pharmacy, and in several instances their fraudulent character exposed and their further sale materially affected. Essential oils were largely

and clumsily adulterated, although it was not always possible to prove this by chemical tests. A New Jersey distiller had frankly admitted that all the commercial oils of cedar, hemlock, and spruce, made by him and his acquaintances, were prepared by putting the branches of the respective trees into the still, with an amount of turpentine proportioned to the price they expected to realize; and prided himself on the superiority of these *distilled* oils over those made by mere admixture with turpentine. As the major portion of the more expensive oils are consumed by bakers, confectioners, soap-makers, and bottlers of mineral water, who have no means of testing them, the necessity of better means for protection, and for the punishment of the guilty, was apparent. The writer had, on two occasions, purchased cans of oil of lemon, one of which contained but seventy-five per cent. of oil, and the others scarcely thirty-three per cent. Adulterations were becoming common in Europe as well. A gentleman who had held responsible positions in the largest German houses had shown him a full line of receipts for mixing and cheapening the prominent oils, which he was anxious to compound in this country. He had also been informed by the representative of a French firm, in Grasse, that the cheap grades of lavender, rosemary, and red thyme, sent to this country by his firm and other manufacturers, contained, at least, seventy-five per cent. of turpentine. The report proceeded at great length to a description of the adulterations and sophistications which had been brought to the notice of the committee, both by direct communication and through the American and foreign scientific journals. A caddy of musk, weighing 19½ ounces, was proved, in an English court, to contain only 6½ ounces; honey, made by melting cane or other sugar in a decoction of slippery elm bark or a solution of gum and starch; linseed oil, adulterated with hemp, fish, rosin, and mineral oils; beeswax, consisting almost entirely of black earthy matter, neatly coated with handsome yellow wax, by repeatedly dipping it into the melted wax, and also adulterated with paraffine; castor oil, composed of lard and croton oils, etc.

After a dinner, given to the Association in the banquet room of the hall, by the pharmacists of Boston, the members proceeded to inspect, officially, the exhibition of specimens, druggists' sundries, etc., in the upper hall. The intrinsic value of the goods exhibited was said to largely exceed that of any previous session, and was, undoubtedly, as fine a display of pharmaceutical and allied products as has ever been seen in this country.

The Third Session opened in the afternoon, with an invitation to the medical faculty of Boston and vicinity to attend the meetings of the Association. Professor Maisch then presented the report of the Committee on Legislation.

There had been a question raised whether the Supreme Court of the United States would

sustain the pharmacy laws passed by the several States, or declare them unconstitutional. The Committee had taken legal advice, which was in favor of this constitutionality. The laws had been sustained in the lower courts. The pharmacy laws of the several States were generally carried out in a proper spirit; frequently more than twenty-five per cent. of the number examined were rejected. A pharmacy law had been passed in New Hampshire and in the Province of Quebec. In the Province of Ontario a bill was presented to the Legislature, but was withdrawn on account of the opposition of the medical profession. The matter of the stamp tax under the internal revenue laws of the United States, which had given much trouble to the pharmacists and druggists, had been satisfactorily settled by section twenty-two of the so-called "little tariff bill," providing that nothing contained in the internal revenue laws should be so construed as to authorize the imposition of any stamp tax upon any medicinal articles prepared by any manufacturing chemist, pharmacist or druggist, in accordance with a formula published in any standard dispensatory or pharmacopœia in common use by physicians and apothecaries, or in any pharmaceutical journal issued by any incorporated college of pharmacy, when such formula, and where found, shall be distinctly referred to on the printed label attached to such article, and no proprietary interest is claimed therein; and that no stamp should be required when the formula of any medicinal preparation was printed on the label attached to such article, and no proprietorship was claimed. These requirements, although a departure from the custom hitherto followed, would entail no hardship upon the pharmacist and druggist, and would enable him to keep on hand, ready for delivery, any legitimate medicine, without being ranked with the manufacturer of patent medicines.

The Committee on the Ebert prize reported that they had awarded it to Charles L. Mitchell, of Philadelphia, for an essay on "The Active Principles of the Official *Veratrum*."

The report of the Committee on Elixirs was read by Mr. William McIntyre, of Philadelphia. They were of opinion that such a nomenclature should be adhered to as would express the remedial composition of the preparation, and thus make available such as possessed therapeutic merit. A uniform simple elixir for general purposes would meet all ordinary requirements, and serve as a guide by which the physician might determine what suited the taste of his patient. The tendency of the pharmacopœia was to present simple preparations, more thoroughly representing the drugs from which they were prepared. More attention was demanded, therefore, in the construction of extemporaneous formulae, and a thorough knowledge of the various spirits, syrups and aromatic waters would give a wide field for the choice of auxiliaries, correctives and vehicles. This information acquired, the preparation of mixtures which would conform to the standard alcoholic strength of

elixirs, and yet be possessed of medical virtue from chemicals and galenical preparations, would become an easy task. The report then presented a revised list of formulae, containing some alterations of those in use.

After much discussion for and against the adoption of these formulae, Mr. Baker said that he had always made the point of interesting physicians in the matter a speciality. It was for that reason that the Washington College coöperated with the Medical Association of the District of Columbia. Formulae might be adopted by the million, but unless physicians prescribed them, they would be only waste paper.

Mr. Maisch, of Philadelphia, said that at the Richmond meeting the secretary was directed to communicate the formulae then adopted to the medical associations of the country. That had been done, but few replies were received. The formulae were then adopted.

The propriety of publishing papers in the pharmaceutical and medical journals, previous to their publication in the volume of the Association, being under discussion, the following resolutions were adopted:—

Resolved, That the various pharmaceutical and medical journals are cordially invited to publish whatever notes they may desire to make of our proceedings and of the scientific papers which are read before our meetings.

Resolved, That when authors of scientific papers have prepared copies or abstracts of their essays previous to the meeting of the Association, they shall be at liberty to distribute such copies or abstracts at any time subsequent to the official reading of their respective papers, provided that the paper is always headed, in publication, by the statement that it has been read at our meeting.

After the presentation of a report of a committee on the subscription of pharmacutists to a memorial to Liebig, Mr. Sanders, of Ontario, read a paper, by Professor Joseph K. Remington, of Philadelphia, on "The Ready-made Pills of Our Day," showing, by careful experiments, that a plain uncoated pill was to be preferred, in point of solubility; next in order, the sugar-coated, the compressed, and the gelatine-coated pill. Mr. B. F. Stacey, of Massachusetts, read an essay on Paraffine and its Modes of Manufacture and Employment, and Professor Babcock referred to its utility as a substitute for wax in instruments, and to a mixture of paraffine and wax, and lard oil, which, under the name of oleo-paraffine, had been used as a substitute for lard. Mr. Joseph Lemburger, of Lebanon, Pennsylvania, in an essay on paraffine oil, referred to its use for producing a permanent base for ointments.

Mr. T. R. Baker, of Richmond, Virginia, presented an extract from the minutes of the Pharmaceutical Association of that city, Nov. 20, 1874, embracing a series of resolutions to be presented to the Richmond Academy of Medicine, urging the importance of writing prescriptions in a legible hand, without erasures

or interlineations; of using technical language, and abbreviations of the Pharmacopœia and the U. S. Dispensatory; of writing directions for use and dose as a guide to the dispenser in case of error in quantity of any active ingredient: that when an unusual dose or quantity of an active and potent medicine is prescribed the prescriber should affix a caution mark or sign, to inform the dispenser that he is aware that the dose is unusual; that the words "not renewable" should be written on prescriptions which they did not desire to be renewed; also the importance of using every possible means to stop the sale of opium, morphia and chloral, except upon competent medical authority. He requested, in behalf of his delegation, that these resolutions be referred to a committee to report upon them during the present meeting. A communication upon similar subjects was also received from the delegation from the Philadelphia College of Pharmacy.

The Fourth Session was held Thursday morning, and was mainly devoted to essays and answers to queries propounded last year. An essay by Andrew Blair, of Philadelphia, was read, on the Various Forms of Drug Mills; after which, Dr. A. W. Miller, of Philadelphia, referred to the uses of Mezquite gum in Pharmacy, and as a substitute for gum arabic.

The report of the Committee on Maximum Doses was presented by Dr. W. H. Pile, of Philadelphia. The committee reported that, in view of the wide difference in the statements of different authorities in regard to the quantities of potent remedies which could safely be administered, they had come to the conclusion that an arbitrary list of maximum doses made from such conflicting authorities would be of no practical utility. They, therefore, suggested that a committee be appointed to confer with the American Medical Association on the subject of maximum doses, as well as the proper signs to be adopted to designate the correctness of larger doses when intended by the physician, as an understanding might thus be arrived at which would prove of practical value to the physician as well as the pharmacist. The report was accepted and the recommendation adopted.

Mr. C. Lewis Diehl then presented an even more elaborate report on the Progress of Pharmacy than that offered by him last year, which then filled more than 300 pages in the volume of Proceedings.

The report was divided into five sections: pharmacy, under which head were comprised the various pharmaceutical papers; materia medica, which gave the results obtained during the year in the history of crude drugs and their botanical characters; inorganic chemistry, giving the results of investigations of inorganic substances; organic chemistry, giving the results of investigations upon the crude vegetable drugs during the year, with the progress in general organic chemistry.

Quite a number of papers were then presented, relating to phosphorus, and phosphoric

and hydrobromic acids. These were exceedingly interesting, but cannot now be fully detailed here. Mr. T. R. Baker, of Richmond, Va., in an essay on chloral hydrate, confirmed previous experiments by other observers, to prove that it possessed powerful antiseptic properties, and could be used to preserve anatomical preparations much better than any of the liquids heretofore used for that purpose.

The Fifth Session was held at 3 p. m. Essays were read on Suppository Moulds; on Tasteless Iron Combinations; on the Use of too Strong Alcohol as a Cause of Precipitation in the Preparation of Spiritus Ammoniae Aromaticus (U. S. P.); on the Manufacture of Iodoform; on the Propriety of Substituting an Official Liquor Chloroformi Comp. for uncertain Chloro-dized Nostrums; on Matico; on Insect Infestations in Rhubarb; on Pancreatin, which, it was stated, as the result of experiment, was destroyed when taken into the stomach, and could, therefore, have neither physiological nor therapeutic effect; on Explosive Mixtures of Carbolic and Nitric Acid, etc. It was stated, by Dr. Jos. Roberts, of Baltimore, in regard to the purity of hydrate of chloral, that all chloral, from whatever source, contained some uncombined chlorine, and would afford a precipitate of nitrate of silver, though the amount of precipitate was very slight. When tested for the amount of chloroform, the practical yield came very nearly to the theoretical amounts which should be present. He suggested that hydrate of sodium yielded a better result than hydrate of calcium, for the purpose of separating the chloroform. Formic acid was the most injurious contamination likely to be found, and was best tested by the amounts of alkali necessary to neutralize it, which could be determined by the ordinary process of volumetric analysis.

Professor Maisch spoke of the immense traffic in patent medicines. The association professed to be opposed to the sale of these medicines. The efforts of pharmacists in this direction would amount to nothing so long as patent medicines were called for by the public. The question had been agitated what was the best means of informing the public of the dangerous nature of many of these nostrums. Dr. Frederick Hoffman, of New York, had suggested the publication of a health almanac, similar to those issued by the proprietors of patent medicines, which should contain analyses of such preparations. Circulars had been prepared upon this subject.

Mr. Bullock, of Philadelphia, read an elaborate and valuable paper, which was cordially received, "on the preparation of the various bromides of the organic and inorganic bases used in American pharmacy." The writer gave formulæ for the preparation of the various bromides and hydro-bromates.

Essays were also presented on Scammony; on the Calabar Bean, giving formulæ for making tinctures, solid and fluid extracts, calabarized paper and calabarized gelatin; on Analyses of Commercial Citrate of Iron and Quinia for

the Quinia Strength; on the Solubility of Sulphate of Morphia, etc.

At the Sixth Session, on Friday morning, Professor Sharples offered a resolution, which was adopted, that a committee of three be appointed to report upon the subject of metric weights and measures. He stated that a similar resolution had been passed by most of the scientific bodies in the country. No profession was more deeply interested in the subject than the pharmaceutical, which had to deal with two varying systems of measures, mixing by one and selling by the other. The process of converting one measure into the other was very difficult, and not generally understood. All the trouble arising from this source would be obviated by the adoption of the metric system.

Professor Bedford, of New York, read papers on impurities in ether and on commercial bicarbonate of sodium. Volunteer papers were also read on methods of packing herbs, and on cod-liver oil; and Mr. Sanders, of Ontario, presented one by Professor Remington, of Philadelphia, on a new method of administering medicines. It consisted simply of a couple of discs prepared from a flour paste; the medicinal material is placed between the discs, which are then placed in a spoonful of water, and as soon as it becomes moistened can readily be swallowed without experiencing any taste of the medicinal ingredient.

Professor Babcock suggested a new method of preparing iodide of arsenic, more desirable than that given in the United States Pharmacopoeia. Papers were read on *grindelia robusta* as a specific for the poison of poison oak, and a valuable remedy for asthma; on objections to the Pharmacopoeia method of making spiritus ammoniæ; and on the preservation of diluted hydrocyanic acid, by distilling the acid and alcohol together. Mr. Sanders showed that elastic vulcanizable gum could be produced from the common milkweed—*asclepias cornuti*—by the action of fermentation on the finely-powdered weed. A number of other papers of value were read by title merely, and referred for publication.

An interesting discussion now ensued on the following resolution, adapted on the previous evening, at a conference of representatives of teaching schools of pharmacy.

Resolved, That this conference communicate to the American Pharmaceutical Association that they are in possession of documentary evidence that the Tennessee College of Pharmacy has offered, through its treasurer and acting secretary, to examine candidates and graduate them without their attending the customary courses, just the same as if they had attended all the lectures."

The documentary evidence was read, consisting of a letter from Mr. B. S. Lillard, which was substantially the offer contained in the above resolution.

Prof. Bedford, of New York, offered a resolution, which was adopted, that a committee of three be appointed to communicate with the

Tennessee College of Pharmacy, and inquire whether such action was authorized by the college, or was undertaken on the individual responsibility of Mr. Lillard.

Mr. Lillard seconded the motion, and explained the action of the Tennessee College. The latter college conferred upon its graduates the degree of Doctor of Pharmacy. The other colleges conferred the degree of Graduate in Pharmacy. Persons who were already graduates of other colleges had applied to the Tennessee College for its degree, preferring the title of doctor. It was customary for colleges to recognize attendance upon courses of instruction in other colleges, and it was the intention of the Tennessee College, and the meaning of the letter which had been read, to signify a willingness to confer the degree of doctor upon graduates of other institutions, without requiring attendance upon all lectures. The degree would not be conferred without examination. He defended the action of the college, and courted the fullest investigation.

Professor Babcock thought the Association had nothing to do with the matter, and moved its indefinite postponement, which was lost.

Mr. Bullock, of Philadelphia, maintained that the matter was properly before the Association, and was of serious importance to the pharmacists of the country and to the public. He thought it could not be acted upon intelligently without further evidence, and supported Professor Bedford's motion.

After resolutions of thanks for courteous attention lavishly bestowed by the people of Boston, and the usual final business, including the appointment of Dr. A. W. Miller, of Philadelphia, as Local Secretary, the Association adjourned to meet in Philadelphia on the second Tuesday of September, 1876.

The Frontier Doctor.

Few physicians appreciate the toils of professional life on the frontier. A correspondent of an exchange, traveling through the Indian Territory, thus describes one he met on his journey:—A day's ride beyond the settlements, half way between Brownwood and the Colorado, we met a frontier M. D. We knew his profession from his *Æsculapian* air; he rode a horse of speed and strength, that shied around us with watchful eyes, distended nostrils, and ears apitch. A rifle hung at the saddle, and the doctor merely glanced at us. So far from home, any sort of a recognition would have given comfort. We would have bowed profoundly to a pharmaceutical nod of the head, but he rode on, solitary and unsocial, with sealed lips, and as erect as a Cossack. We had the curiosity, subsequently, to ask, and learned that the call was fifty miles distant, through an Indian country, involving a hundred mile ride, not an unfrequent occurrence. The M. D.'s bill, our informant told us, would not exceed fifty dollars. If true, we know not which most to admire, the moderation of the charge, or the courage of the rider.

EDITORIAL DEPARTMENT.

PERISCOPE.

Abstracts of the More Important Papers Read Before the British Medical Association.

On the Modern Treatment of the Advanced Stages of Constitutional Syphilis. By William Acton, M. R. C. S. Eng., London.—The author spoke of the ravages produced in syphilitic patients in the time when it was the custom to administer mercury in excess, and to the reaction against this practice in the form of the so-called expectant treatment. He then gave an exposition of Ricord's views on the treatment of syphilis; and enunciated the following laws as those which should guide the practitioner in the management of the disease:—1, That mercury is most successful in the treatment of secondary symptoms; 2, that iodide of potassium is to be principally depended on in tertiary symptoms; 3, that a mixed treatment is applicable in cases of advanced constitutional syphilis. In conclusion, he made some remarks on the necessity of preventing syphilis, and described the result of observations which he had made on prostitution in Edinburgh, where he found the evil to prevail to an excessive extent.

On the Treatment of Strumous Enlargements of the Glands by Hypodermic Injections. By Morell Mackenzie, M. D., London.—The author commenced by stating that his paper had reference principally to disease of the cervical glands, for it was in that situation that it was most important to get rid of the enlargement without disfigurement. Practitioners had always found great difficulties in dealing with these cases, as treatment often exaggerated the deformity. The author stated that, as the result of his experiments with many different solutions, he had found the dilute acetic acid the most valuable remedy. As a rule, he injected once a week; but where several glands were affected, the injections could be made more frequently. It was desirable, if possible, to cure by absorption; but sometimes suppuration could not be prevented. In these cases, the pus should be drawn off by a fine aspirator. Suppuration was apt to be followed by thickening of the walls or outer portion of the glands. In these cases the oleate of mercury (ten per cent.) was most valuable. The author then proceeded to quote in detail some of the thirty-six cases which he had treated with acetic acid. He concluded by stating that he did not believe that the cure of these cases rendered the patient more liable to phthisis. He had seen many cases of phthisis develop where glandular enlargements had existed untreated; but he knew of none where pulmonary disease had followed the cure of such cases. On the other hand, he thought that phthisis was more likely to follow

the spontaneous breaking down of glandular tissue.

Conservative Aural Surgery. By James P. Cassells, M. D., Glasgow.—Defining aural surgery as surgical common sense rightly applied, Dr. Cassells insisted that, inasmuch as all intelligent surgery was conservative in its aims, aural surgery was so likewise, because aural surgery was simply general surgery, *plus* special knowledge. But this claim did not rest on inference alone; for it was capable of proof that aural surgery possessed this principle, and that it did not exist as a scientific pursuit if it lacked it. While he admitted that the principle did not always arrest the passing attention in general surgery, it was otherwise in the surgical treatment of the diseases of the organs of special sense, because normal function in them depended upon the complete integrity of their tissues. Apart from this, however, there were special reasons why aural surgery was pre-eminently conservative; these were: 1. Diseases of the ear did not tend of themselves to natural cure, but to become progressively worse, and more serious in their consequences; 2. Of these diseases, only those were preventable and curable that admitted of surgical treatment. These conclusions were the outcome of his own experience and observation. Regarding the congestive diseases of the ear as those in which surgical treatment was demanded, he considered them the only ones in which the conservative principle was applicable, and that early incision of congested tissue was the foundation of conservative aural surgery. Accepting exanthematous catarrh of the tympanum and its appendages as typical of these congestive affections of the organ, he sketched its natural history, and pointed out the two stages in its progress in which aural surgery, as a preventive and preservative method of treatment, was specially indicated; urging its adoption upon the attention of those present, on the grounds that this disease, in its initial stage, was capable of being arrested, and that, in its later stages, its ravages were limitable by the proceeding which he recommended to their notice. While he directed attention specially to this disease as the one in which aural surgery, as a conservative measure, was applicable, he desired to say that its application was not confined to it, but was called for in all the congestive affections of the external ear as well, out of which many serious complications arose. He then referred to paracentesis of the membrana tympani as the operation representative of conservative aural surgery, because this principle was first noticed in connection with the treatment of the disease, the history of which he had sketched, by the operation which he had just named, and which he now recommended to the profession, with

certain modifications, based upon and suggested by a more perfect pathological and clinical knowledge. He then glanced at the history of the operation, which was, indeed, the history of the origin of the principle of conservatism in this department of medical science; and concluded by saying that the aims of aural surgery, whether exhibited in simple incision of congested tissue, or in the more pretentious operation of paracentesis of the membrana tympani, were to prevent and to preserve, and that it was misapplied if employed for any other object.

New Operation for Ununited Fractures. By Matthew Hill, F. R. C. S., and M. R. C. P. Ed., Bootle, Liverpool.—The operation devised by Mr. Hill for the cure of ununited fractures consists, like Dieffenbach's, in driving ivory pegs into the fragment, but is different in all other respects. The old operation entails a large wound in the soft parts and exposure of the bone; in short, renders the fracture "compound;" in the new operation this is avoided, the pegging being done subcutaneously. The necessary tools are an Archimedean-screw drill-stock, with two or three drills, and ivory stilettes about four or five inches long. The drill and stilettes are similarly graduated in half inches, and the ivory is, moreover, grooved like a director, in order to facilitate its introduction alongside the drill, and afterwards to allow the escape of inflammatory fluids, which might otherwise be pent up in the bony fragments. The *modus operandi* consists in entering the drill through a puncture made by a tenotome; the boring of the bone is next proceeded with, the graduations enabling the operator to calculate his depth to a nicety. The ivory stilette is now filed transversely half way through, at a distance from the point corresponding to the depth of the hole in the bone; it is next slid down beside the drill, which is then withdrawn, the stilette slipped into its place, lightly hammered, and with a sharp twist broken off at the notch, flush with the surface of the bone. The remainder of the ivory is now withdrawn, and the puncture sealed with a strip of plaster. It is obvious that as many pegs may be introduced in this manner as is thought desirable; in the author's case three were introduced without causing any subsequent mischief or the formation of abscess. The punctures healed kindly, and by the "first intention."

The Surgical Treatment of Lymphatic Tumors of the Neck. By S. Messenger Bradley, F. R. C. S., Manchester.—Mr. Bradley limited his paper to the consideration of certain nuchal lymphatic tumors, which he divided into three classes; 1. True hypertrophies, with or without a strumous diathesis, and showing no tendency to break down or undergo pathological change; 2. Strumous hypertrophies, consisting of cellular hyperplasia plus caseous deposit, which, after a time, soften either in patches or entirely, until the gland becomes a mass of soft strumous matter; and 3. Hard, non-infectious

lymphomata. Mr. Bradley said that, as a rule, these cases were lumped together and treated generally, indiscriminately and unsatisfactorily by the local application of iodine and the internal administration of cod-liver oil, etc. It was his wish to substitute an arm of precision for this hit or miss method; and, from an extensive trial, he was able to say that, by a proper selection of cases, this could be done. For several months he had injected the harder lymphatic tumors with a few drops of tincture of iodine, with the almost invariable result of causing a rapid diminution, going on to complete absorption of the gland. He had even succeeded in producing absorption of some encapsulated tumors situated on the salivary glands by this means, but confined himself at present to recommending this mode of treatment in hypertrophies of the lymphatic glands. As a rule, two or three injections of from five to fifteen minims of the simple (P. B.) tincture of iodine, was sufficient to effect a cure. No other treatment was necessary. This plan had the advantage of being comparatively painless, safe, and speedy. It was not applicable to all lymphatic tumors, and, if used indiscriminately, would fall into disfavor and desuetude. To avoid this, he laid down the following rules for the surgical treatment of these nuchal tumors:—
1. *Cases to be treated by Injection of Iodine:* a. True hypertrophies of cervical glands without scrofula; b. Strumous hypertrophies of cervical glands before they have broken down; c. Hard (non-infectious) lymphomata; d. All encapsulated tumors, as a tentative operation. 2. *Cases to be treated by Incision:* Lymphatic tumors that have, either with or without previous injection of iodine, broken down into pus. 3. *Cases of Cervical Tumors to be treated by Extirpation with the Knife:* a. Strumous glands which form tumors riddled with soft patches, and resting on a base of suppurating cellular tissue, with a large area of blue skin; b. Encapsulated tumors which have resisted the treatment by injection.

Tobacco and its Effects on the Health of Males. By Charles R. Drysdale, M.D., London.—The author said that the result of a paper by him read at Norwich had shown that, although very many—far too many, he thought—eminent physicians and surgeons made use of tobacco, yet none could be found bold enough to say that the practice of smoking, chewing or snuffing was consistent with health. The population of the British isles used some fourteen millions sterling yearly in the purchase of tobacco, pipes, etc. Nevertheless, there had always been able medical objectors to the *sainte herbe*. The alkaloids contained in tobacco, or in tobacco-smoke, were very poisonous; and, when smoke was taken into the mouth, a portion of such alkaloids, dissolved in the saliva, entered the circulation readily enough. Smoke breathed in small rooms, or railway carriages, also poisoned to a certain extent all who inhaled it, whether smoking or not. The first

cigar or pipe showed the effects of *acute* tobacco poisoning, producing nausea, vomiting, hic-cough, dyspnoea, prostration, coldness of the extremities, cold sweats, and intermittent pulse. *Chronic* poisoning by tobacco, the ordinary disease seen in practice, was tested by Bleton, who administered two or three grains of tobacco daily to dogs with their food. The animals lost appetite, had diarrhoea, swelled gums, loosening of teeth, irregular action of the heart, paralysis of the hind legs, blindness, and deafness. Black teeth and spongy gums, with fetor of breath, were common in smokers. An affection of the tongue and epithelioma of the lips was common enough in smokers. Tobacco amaurosis was too well established to be denied; and Mr. Critchett alleged that the wealthier young men of this day very frequently injure their sight grievously by their great smoking. Palpitation of the heart was common among smokers and chewers, as well as paleness, and occasionally intermittent pulse. Decrepitude came far too quickly upon great smokers; and Dr. Drysdale attributed, in some cases, the occurrence of ricketty children to the use of tobacco by the male parent. Brodie said of tobacco, that it tended to make the race degenerate. Sir William Jenner said smoking tended to produce palpitation, prolapse of the rectum, and impotence. Miller and Jolly alleged that chronic tobacco-poisoning caused palsy and insanity. Bertillon had shown that smoking was most injurious to the functions of the brain in youth. Kostrál showed how many diseases are produced by tobacco in the Austrian State Factory. Fortunately, said Dr. Drysdale, our European women do not smoke. They prefer good breath and clean teeth to fetor and black stumps, and do not like to become dreamy, nonchalant, and fractious, like the chronic votaries of the pipe or cigar.

The Digestive Principle of Insectivorous Plants. By Lawson Tait, F. R. S. E., Birmingham.—Mr. Tait communicated the results of certain experiments he had made, for the purpose of separating the digestive principle or ferment on which the remarkable power possessed by certain plants, as pointed out in Mr. Darwin's recent interesting work, is dependent. Mr. Tait showed that it was possible to separate this principle from the plant, for experimental purposes. As to the precise method of its action, he was still engaged in inquiry; but, so far as his researches had gone, he was able to confirm the view taken by Darwin, that the chemical processes concerned in animal and plant digestion were identical.

The Effects of Certain Drugs upon the Intracranial Circulation. By J. M. Fothergill, M. D., London.—Dr. Fothergill stated that, in producing effects upon the intracranial vascularity, there were two factors: (1.) a direct effect upon the circulatory system; and (2.) an effect upon the cerebral cells, by which they attracted more blood, or less blood to themselves. These factors existed in varying

proportions in different drugs; and according to the exigencies of each case, one or other agent should be chosen, as opium in cases of insomnia from pain; chloral-hydrate, rather, when the sleeplessness takes its origin in a high blood pressure. Whether the agent administered depresses or stimulates the nerve-centres, its action can usually be intensified by giving it along with drugs which act directly upon the circulation, as opium with antimony, and quinine, which affects the encephalic blood-vessels, with digitalis, which raises the blood-pressure generally.

On General and Local Fatigue.

Dr. G. V. Poore says, in the *Lancet*:—

We recognize the fact that athletes who "over-train" run risks of cardiac troubles and loss of wind; that the man who, from any cause, is unable to sleep, runs a serious risk of permanent impairment of health; and when we find patients pursuing their avocations too zealously we know that if such offence against the laws of nature be persisted in, general paralysis or other form of "break-down" is likely to be the result.

Fatigue may be general or local, and both forms may be either acute or chronic.

That fatigue in all its forms is due to impaired nutrition there can be little doubt, and we shall find that the symptoms of chronic fatigue are often the prelude of definite and recognizable degenerative changes.

As to general fatigue, it is recognizable with ease, both in its acute and chronic forms. There is a disability for performing either mental or physical work, and this disability is noticed first in work requiring attention and sustained effort, and, lastly, in those acts which have become automatic. The symptoms of general fatigue are referable usually to the brain and nervous system.

As to local fatigue, this, again, may be acute or chronic, and the symptoms of it are referable usually to the muscles; but we must always bear in mind that muscle and motor-nerve are one and indivisible, and that recent experiments have given great probability to the idea that every muscle is connected with a certain definite spot in the brain. When, therefore, we speak of a sense of fatigue we must necessarily be in doubt, notwithstanding the fact that the symptoms are referred to the muscle, whether brain, nerve, or muscle, one or all of them, be really at fault. The symptoms of acute local fatigue are (1.) loss of power to a greater or less extent. By too frequent or too prolonged stimulation, the irritability of muscular tissue becomes exhausted, and it either refuses to respond or responds but feebly to the stimulus of the will; our power of adjusting the force of contraction to the act to be accomplished is lessened, and accuracy of movement and delicacy of co-ordination become impossible. (2.) Tremor is a symptom of acute local fatigue, which every one who has been called upon for extraordinary muscular effort must have ex-

perienced. (3.) Cramp-like contraction is the symptom of local fatigue which disturbs our rest after a hard day's walking or riding, or muscular efforts in the ball-room or elsewhere. (4.) The pain of fatigue is familiar to most of us, and is readily distinguishable from other forms of pain.

REVIEWS AND BOOK NOTICES.

NOTES ON CURRENT MEDICAL LITERATURE.

—The following monographs have been republished in separate form:—

"The Mucous Membrane of the Uterus, with Special Reference to the Development and Structure of the Decidua." By George J. Engelmann, M. D. With fourteen illustrations. Cloth, pp. 65.

"Alimentation and the Gastro-intestinal Diseases of Infants and Young Children." By B. F. Dawson, M. D. Paper. pp. 22. Both are reprints from the *American Journal of Obstetrics*, and may be had of W. Wood & Co., New York.

"A Paper giving the Result of One Hundred Operations for Catarrh." By Dr. Eugene Smith, of Detroit, Michigan. A reprint from the *State Society's Transactions*. May be obtained from the author.

—It will interest American medical men to know that the Code of Ethics of the American Medical Association has been unanimously adopted by the Medical Society of Munich, and translated for the benefit of members. Its German dress bears the title, *Der Aertzliche Stand und das Publicum. Eine Darlegung der beiderseitigen und gegenseitigen Pflichten*. Jos. Ant. Finsterlin in München. 30 Pfennige.

The example here set in Bavaria will, we have little doubt, be followed elsewhere in Germany, and the Code become the norm of professional relations everywhere.

—"Curling on The Testis," has been translated into Chinese, by Dr. Manson, of Amoy.

BOOK NOTICES.

Transactions of the Medical Association of the State of Alabama. Twenty-eighth Session, 1875. Cloth, pp. 359. Montgomery, Ala.

This volume bears, not only in its size, but

still more in its contents, most gratifying testimony to the scientific activity of the medical profession of Alabama. The papers it contains are carefully prepared, and their subjects show that the writers see our science from its utilitarian and immediately beneficent aspect, which is that suitable for the practical worker in it. Such subjects are Tuberculosis and Scrofulosis, discussed by Dr. E. P. Gaines; Mobile; Nystagmus, by Dr. J. S. Bankson; Malaria, by Dr. B. H. Riggs, of Selma; and Diphtheria, by Drs. C. Cochran and E. P. Gaines. An article of extensive research is that by Dr. W. D. Bizzell, on the Climate of the United States considered with reference to Consumption and Pneumonia. He winds up with the observation which we re-echo:—

"If physicians would give the subject of climate the attention its importance deserves, the number of persons benefited at our health resorts would be far greater." The History of the Small-pox Epidemic in Mobile (1874-75), by Dr. Jerome Cochran, is a useful contribution to the history of that complaint. The author, however, has plainly not been conversant with the recent literature on vaccination, or he would not place so much faith in Dr. Seaton's views of the relative value of human and bovine lymph. The researches of Foster, Jones, and others in this country, oblige one to make considerable modifications of the views held five years ago on that subject.

Transactions of the South Carolina Medical Association. Annual Session, 1875. pp. 267.

The scientific papers in this volume are: Ergot, its Hypodermic Use in Hemorrhage, especially Uterine Hemorrhage, by James McIntosh, M. D.; Report on Bright's Disease, by J. F. M. Geddings, M. D. (very full, 125 pages in length); Report on Puerperal Convulsions, by J. Priolean, M. D.; Fibroma of Upper Maxilla, by G. S. Baruch, M. D.; Acute Articular Rheumatism with Heart Complications, by the same; Spinal Meningitis, by A. A. Moore, M. D.; A New Form of Intra-uterine Stem Pessary, with remarks upon the general use of the intra-uterine stem, by R. A. Kinloch, M. D.; Open Dressing of Amputation Wounds, and Wetted Adhesive Straps, by F. Peyre Porcher, M. D.; Comminuted Fracture of Femur in a patient eighty-three years of age, with recovery by plaster of Paris dressing, by R. W. Gibbes, M. D.

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**ON THE AVOIDANCE OF CAUSELESS SUITS
FOR MALPRACTICE.**

Sir JAMES PAGET, in his lately published volume of Lectures, has one upon the "Calamities of Surgery," in which he ably illustrates how sometimes most disastrous results follow on simple operations, through wholly incidental causes. His frankness illustrates not only the perils of patients, but of surgeons, for in spite of skill and care the latter may expose themselves to charges of malpractice.

This has been properly exciting much attention of late. An illustration of it is furnished in a paper read before the Medico-Legal Society of New York, by Dr. Frank H. Hamilton, which has been printed in the *St. Louis Medical and Surgical Journal* for July, and separately. The surgeon, of all medical practitioners, is peculiarly liable to prosecution for malpractice; during the period from 1833 to 1861, or thereabouts, so frequent were these prosecutions in New York, and also in the Eastern and Western

States, that "many eminent surgeons felt compelled, in self-protection, to abandon the practice of surgery." Latterly, the danger to the profession has again revived, and Dr. Hamilton was recently addressed by a brother physician with reference to "some kind of a contract which he had been informed was used by the professor when taking charge of important surgical cases. In the midst of an ignorant community," he wrote, "he had learned the folly of being perfectly unprotected while carrying on quite an extensive surgical practice, and asked for a copy of such paper or contract."

This was only a sample of many letters which had been received by Dr. Hamilton. The branch of surgery most exposed to prosecution is that of fractures and dislocations, in which American surgeons have a high reputation. But they seem to have relied too much on their improved appliances, and promised better results to their patients than they were able to achieve, the line between the possible and impossible not having been drawn by carefully collected statistics until Dr. Hamilton himself began the task, in 1849.

In the meantime, a change has been going on in the treatment of fractures, and there has been a partial return to old and discarded methods, and the surgeon who now employs the forms of apparatus or dressing in vogue twenty-five years ago, does so at the risk of being held responsible for an error of judgment in resorting to an obsolete practice. On the other hand, to adopt the new methods implies a guarantee of the inventor's claim in regard to their efficiency, and a failure to make good this claim will be attributed, not to the preposterousness of it, but to the surgeon's want of skill. So, between the over-sanguine inventor and the public, which is quite ready to admit his pretensions, having the American mania for "improvements," the surgeon is certainly ill at ease. "Nothing will save him," concludes Dr. Hamilton, "but the Truth, and in such a form that it can be made available by

the profession, the public, the lawyer, and the courts."

In this connection the following resolutions, passed by the Medical Society of Butler Co., Pa., recently, will show the tendency of the profession:—

WHEREAS, In a number of instances in this county, physicians and surgeons have been sued for malpractice, in unwarrantable cases, by persons who could not, or would not, and did not pay for any professional attendance; and

WHEREAS, Such suits have been encouraged by unprofessional and unwarrantable interference by outside physicians and surgeons (so-called) who place no value on professional courtesy, but strive to elevate themselves at the sacrifice of the truth, honor, and dignity of the profession, therefore

Resolved, That the President appoint a committee to take into consideration what steps can be taken for the better protection of the members of this society.

We should recommend similar proceedings on the part of every medical society, with a view to obtain—not exculpation from the effects of real ignorance—but freedom from causeless litigation. To this end the following act has been recommended by the Medico-Legal Society of New York City:—

AN ACT providing for the protection of physicians, surgeons, dentists, editors, authors, publishers, artists, architects, designers and engravers, against speculative law suits.

The people of the State of New York, represented in the Senate and Assembly, do enact as follows:—

SECTION 1. Be it enacted, that in all suits that may be brought against any physician, surgeon or dentist, for alleged damages in any case arising from any alleged malpractice on the part of any physician, surgeon or dentist, or against any editor, author or publisher, for any alleged libel, or against any artist, architect, designer or engraver, for any alleged damages done in his profession, the plaintiff shall, before such suit be commenced, give a bond in at least double the amount of damages claimed in such suit.

SEC. 2. Such bond shall be signed and secured by two or more sufficient sureties, who shall be freeholders or householders, to be duly

approved by one of the judges of the court in which such suit shall be commenced, conditioned that if the plaintiff shall not maintain such suit, or shall not recover against the defendant, such sureties shall well and truly pay to the defendant all costs and damages that the defendant may sustain by reason of such suits, and all legitimate expenses incurred in defending the same.

SEC. 3. If, during the pending of such suit, the said sureties, or either of them, shall become insolvent or irresponsible, the plaintiff shall immediately substitute other good and sufficient sureties, to be approved in like manner hereinafter provided for.

SEC. 4. In case the plaintiff shall not comply with the provisions of this act, no such suit shall be maintained against any physician, surgeon or dentist, for any alleged damages, in any case of alleged malpractice, or against any editor, author or publisher, for any alleged libel, or against any artist, architect, designer or engraver, for any alleged damages done in his profession; and that any suit may be dismissed, on motion of any defendant, at any time after any process may have been served on the defendant in any such suit, and such defendant shall be entitled to, and shall recover against any such plaintiff, such costs and damages as the court shall award upon such motion to dismiss any such suit.

SEC. 5. Whenever any plaintiff shall not maintain the suit, nor recover damages as hereinbefore provided, the defendant shall immediately commence a suit upon the bond hereinbefore provided to be given, and such suit shall be a lien upon the property specified in such bond, upon a motion of *lis pendens* being filed by the clerk of the court in which such suit shall be commenced.

SEC. 6. All acts inconsistent with this act are hereby repealed.

SEC. 7. This act shall take effect immediately.

This, or something like this, should be urged on the Legislatures of all the States. It asks nothing but what is equitable and good for the community.

A Prize Essay on Bright's Disease.

The Medical Association of the State of Alabama offer a prize of \$100 for the best treatise on this disease, to be forwarded not later than February 1, 1876. For particulars, address Dr. Benjamin H. Riggs, Selma, Alabama.

NOTES AND COMMENTS.

Therapeutical Notes.

CONJUNCTIVITIS.

A Swiss physician, Dr. Emmert, has found a solution of tannin, five to fifteen per cent., of excellent service in acute conjunctivitis. One drop of the solution is put on the eye every two hours.

COMPOUND TINCTURE OF BENZOIN.

Mr. Donaldson observes that the use of this remedy having again been revived by Surgeon W. J. Charlton, is beginning to be frequently used in Burmah. The combination usually prescribed by Dr. Charlton, is—

R. Tr. benzoini co.,	℥j
Tr. catechu co.,	℥j
Tr. opii,	℥x
Ext. hæmatoxyli,	gr. x
Aquæ,	℥j.

Ft. haust. To be given three times a day.

It occasionally happens, particularly in those cases where *ipecacuanha* has been unnecessarily persisted in, that the stomach becomes intolerant of the medicine. In such a contingency, it may be administered by the rectum with equal good effects.

AN INSECT POWDER.

An exchange states that *ledum palustre*, Lin., in its fresh and dried state, destroys insects, and the tincture, externally applied, allays the itching and pain produced by the stings of insects; it should be collected while in bloom.

The Extent of Trichinosis in the Mississippi Valley.

The *Transactions* of the Indiana State Medical Society, 1875, contain a report on trichinosis, by Dr. George Sutton, of Aurora, Indiana, which asserts conclusions so startling that it is our duty to give them every prominence. They are as follows:—

"That from microscopic examinations of pork killed in southeastern Indiana, we have found from three to sixteen per cent. of the hogs affected with trichina, the number of hogs diseased varying greatly in different localities.

"That over five millions of hogs are slaughtered and packed in the Western States, not including those which are put up for family use by the farmers; that if four per cent. of this pork is diseased, which we believe to be a low estimate, we have two hundred and twenty-one

thousand four hundred and eighty-four diseased hogs put annually upon the market; or, at an average of two hundred pounds to the hog, forty-four millions two hundred and ninety-six thousand eight hundred pounds of diseased meat, every ounce of which, under favorable circumstances, is capable of producing disease.

"That from the cases of trichinosis that came under our observation, and the post-mortem examinations, and the effects upon the dog that was fed on the diseased meat, we have come to the conclusion that ninety per cent. of disease produced from eating trichinous pork appears either as gastro-enteritis, or as a diarrhoea or dysentery, and not more than ten per cent. as the fully developed form of trichinosis, in which the muscular system becomes affected.

"That as diarrhoea, dysentery and enteritis rank high as causes of mortality in the United States, these diseases causing thirty-one thousand one hundred and fifty-three deaths in 1870, as shown by the last census reports; and as we have seen that a large amount of trichinous pork, capable of producing these diseases, is among the principal articles of food in our country, we think it more than probable that trichina have a much greater influence in the etiology of this class of diseases than has been recognized by the profession.

"That it is highly probable that when the fact becomes more generally known, that so large a per cent. of pork is swarming with trichina, capable of producing disease, it may have an effect upon the use of this meat, and consequently affect the sale, to some extent, of one of the principal articles of commerce in the west."

Salicylic Acid.

In the *Archiv für Klinische Medicin*, Dr. C. E. Buss, of Basel, has a long article on the use of salicylic acid as an antipyretic. His conclusion is that it possesses remarkable power in this direction, rivaling that of quinine. He recommends the acid to be given in the evening, and but once daily. A perceptible fall of temperature regularly ensued. To reach an action equal to that of quinine, double the dose should be given. He advises, however, against doses over two scruples. It may be given in a powder, or a lozenge, with sugar. Care must be exercised that the dry powder does not cause vomiting.

In the *Berliner Klinische Wochenschrift*, Dr.

Hanow gives his experience with salicyl in diphtheria. He claims to have had "astonishingly favorable results." He makes a weak solution of equal parts of the acid and phosphate of soda in water (about three grains of each to the ounce), and has the patient swallow, slowly, a tablespoonful of it every hour. "After the third or fourth dose, in every case, the false membrane was detached, and was thrown up so fast that it caused some choking. With the disappearance of the exudate, the fever diminished, and convalescence set in in twelve hours."

Rokitansky's Farewell Address.

On the 16th of July the distinguished anatomist and pathologist, Rokitansky, delivered, in the University of Vienna, his valedictory address before retiring from the professorship. It is a vigorous and thoughtful production, rich with the wisdom of wide experience. He entitles it his "Legacy to his Scholars." Various questions of the day are touched upon. One of his warnings is against admission of woman to equality with man; another, against an excess of competition in life; and a more urgent one, against "modern individualism," which shows itself in the ruthless pursuit of personal objects, and in the readiness with which the ethics of the day excuses all manner of wrongdoing, out of a misplaced sympathy; or a belief that nothing is in itself bad.

Hereditary Transmission in Disease.

The laws of transmission, by descent, were applied to epidemic disease, with great success, by DeCandolle, of Geneva, as explained, at the time, in the *REPORTER*. Recently Sir James Paget has spoken of the modification of disease by descent. He states, for instance, that "in members of cancerous families, not only recurrent tumors and rodent ulcers are much more frequent than in other families, but fatty tumors and harmless warts and nodular growths of skin may be explained on a theory of evolution of disease." With his usual caution he then "hazards a guess," "that the evolution of cancer in many generations may be studied in the whole group of hereditary diseases." Beginning in monstrosities by excess, differentiations from the normal type may show themselves in the form of simple overgrowths, or as innocent tumors, "thence to recurrent tumors composed of the same structures in embryonic forms, till genuine

cancer is arrived at." But if there be evolution of cancer there may also be a process of involution, and some cases of recurrent and simple tumors met with in families in which cancer occurs may, perhaps, be gradual reversions to the healthy type of shape and structure. Processes of evolution and of involution are probably always going on, so that those manifestations of cancer, gout, or tuberculosis which appear to be primary, may in reality be inherited. In fact, Sir James does not believe that any of these conditions can arise from any external conditions whatever, and independent of inheritance.

The Use of Wind Instruments as a Prophylaxis in Phthisis.

Dr. Burg, of Paris, has written a pamphlet on the question, "Are declamation, singing, and, above all, wind instruments, dangerous exercises for persons of weak or delicate constitution, and more or less predisposed to serious diseases of the respiratory organs?" Most physicians, he observes, will answer in the affirmative; he takes the contrary ground.

A manufacturer of wind instruments once said to him:—

"The men who make it their profession to try the wind instruments made at the various factories, before sending them off for sale, all, without exception, to my knowledge, are free from pulmonary affections. I have known many such who, on entering upon this profession, were very delicate, and who, though their duty obliged them to blow for hours together, enjoyed perfect health after a certain time. I am myself an instance of this; my mother died of consumption, eight of her children fell victims to the same disease, and only three of us survived, and we all play on wind instruments. The day is not far distant, perhaps, when physicians will have recourse to our dreaded art in order to conquer pulmonary diseases."

Whether there was a surreptitious eye to trade in this, or not, we do not say.

On "Galloping" Syphilis.

This is the name given by Dr. Levin, of Stockholm, to a form of syphilis which infects the whole system from the outset, and is followed in a few weeks by secondary symptoms. Fever, prostration, wide ulceration, and considerable pain, characterized the cases. Such a form generally occurs in constitutions previously broken by excesses.

CORRESPONDENCE

Incontinence of Urine Cured with Electricity.

ED. MED. AND SURG. REPORTER :—

In your journal, of August 14, 1875, I read an article, copied from the *Lancet*, written by Dr. F. N. Otis, upon the above subject. He says "sedatives and narcotics palliate but never cure the disease." He recommends surgery in most cases, and says, "let me cite a case or two" to prove his practice. Every physician has a right to his theories, provided they can be brought into practical use.

I have practically proven that electricity is the best agent; better than either the knife or medicine, for they have both failed me, and electricity never has. It is a fact, known to the profession at large, that this disease is stubborn, and does not yield to treatment readily.

I will cite the first case of enuresis nocturna that I treated successfully with electricity. The patient a lady, twenty-six years of age, unmarried; she had no control of her urine at night, and very little through the day; she had scarlet fever when three years old, and since that time had been affected with this unfortunate disease. Knowing the benefit gained by the mechanical action of electricity, I determined to experiment with it in this case.

Upon examination, I found the meatus urinaris relaxed, and the mucous membrane of the urethra flabby. I took a female catheter, attached the contracting current to it, and inserted it into the urethra, and then applied the relaxing current over the bladder, applying the current strong enough to contract spasmodically the bladder, the seance lasting long enough to produce slight irritation (about an hour). This course of treatment was continued six successive days, until I had gotten up a healthy inflammatory action; I then gave a general downward treatment; by that means reduced the inflammation.

My experience in treating indolent ulcers and other morbid conditions, was to use the remedy that would arouse a healthy inflammation the quickest. Electricity never fails me. I gain this reaction by stimulating with the tonic current, following it up until I gain the result desired, then dame nature, ever ready to help herself, will restore our patient, as she did in this case. Here we find seven treatments of electricity permanently cured (now three years have passed, and the patient is well) what medicine failed to do in twenty-three years. I could cite other cases, in this city, where from four to ten treatments have cured them. If we find a stricture, or contracted condition, we must use the relaxing current to the part affected, let it be the vagina, urethra, or rectum, but in those cases we must have a reaction. When a patient complains of soreness, I tell them that is just what I want: this holds good only in chronic diseases. S. E. SURGERS, M.D.

Washington, D. C.

The Prevalence of Abortion.

ED. MED. AND SURG. REPORTER :—

When you deny, in the issue of August 28th, the prevalence of abortion in this country, I am constrained to inquire what you mean by prevalence. I practice in a village of three hundred inhabitants, with a surrounding rural population fully up to the average in health, intelligence and morality, and I am far within bounds in saying that the number of abortions that come to my knowledge equals ten per cent. of the whole number of births, while the number of applications made to me to procure abortion equals three per cent. of the calls to attend cases of natural labor. And this, in spite of the fact that I have invariably refused to be a party to this most detestable of murders.

I know three married women, respectable ones, who are notorious for giving instructions to their younger sisters as to the *modus operandi* of "coming round."

After the failure of tansy, savine, ergot, cotton root, lifting, rough trotting horses, etc., a knitting needle is the stand by. One old doctor near here was so obliging as to furnish a wire, with a handle, to one of his patients, which did the work for her, after which she passed it to one of her neighbors, who succeeded in destroying the fetus and nearly so herself. Sad to say, the above mentioned reprobate is regularly educated, however irregular his practice. If any other form of murder were as common as feticide, would we not consider it terribly prevalent?

I am glad to see your agitation of the subject of sexual relations. If it is true, as stated, that in the Oneida community sexual congress is allowed only by vote of the society, then that community, however false their general views, have a safeguard for the health of their women and children for which we have in practice no substitute.

Whether men deliberately claim the "right of the husband (!)" or are goaded into an unnatural excitement of their weakened generative systems by the presence of a woman in bed with them, the direful effect is the same. Worn with child bearing and rearing, with ministering to the demands of a man who, in the present state of sexual things, could meet the natural desires of ten women, and nearly always overwhelmed with manual labor, what wonder that, in her ignorant despair, she should seek to rid herself of the unwelcome fruit of forced intercourse. Not ten days ago, a lady, the wife of an unusually intellectual Christian gentleman, pathetically exclaimed, "I count the days till I shall be fifty years old."

The sexual problem needs speedy solution, and as an amendment to Victoria Woodhull's free and cosy plan, I would offer bromide of potassium.

I trust you and your co-laborers will continue to discuss the subject, till the medical profession shall be able to teach an enlightened sexology.

Atkinson, Ill.

W. M. SMITH, M.D.

NEWS AND MISCELLANY.

The Woman Question.

In spite of the ukase forbidding Russian women to pursue the study of medicine in foreign universities, four continue at that of Zurich.

Women are to be admitted to the medical classes of Copenhagen this winter. They are to pass the same examinations, and have the same opportunities to contend for prizes, as the male students. But they are not to claim any position in the civil or military service.

The reading of a paper of Mrs. Garrett Anderson before the British Medical Association met with much resistance. The general Secretary is to obtain the written opinion of each member as to the desirability of having female associates.

The Woman's Medical College, of this city, promises to have a full class this winter.

Personal.

—Dr. T. J. Hutton has accepted the position of Assistant Physician in Dr. Givin's retreat for mental disease, at Burn Brae.

—The eminent anatomist, Dr. J. M. Weber, died at Bonn, July 28th, aged eighty years.

—The well-known physiologist, Prof. Wundt, has accepted a professorship in Leipzig.

Items.

—There is a good deal of cholera all over India, and as the season advances there is every reason—judging from past experience—to anticipate an increase, both in the number of cases and the virulence of the disease. There is also cholera in Ceylon.

—In Berks county, Pennsylvania, a child tried the experiment of eating a potato bug. A nauseous sickness followed, which the prompt efforts and skill of Dr. Diller allayed, although for a little while the infant was at the point of death.

—A British journal says the cows on the island of Ushant, off the coast of Brittany, feed principally on seaweed, whereby their milk is impregnated with iodine, and it is proposed to use this medicated milk for the cure of diseases.

—An Odd Fellows' asylum is to be built by the brethren of Jacksonville, Florida, for the benefit of those in the order who seek the State for their health.

—The President of the Geological section of the British Association gave his opinion that no direct evidence has yet been given that man existed previous to the glacial period.

—The Emperor of Brazil has sent Professor Virchow a number of skulls from the bone-caves of Brazil. He accompanied the gift with an autograph letter.

—The town of Milton, Florida, has been devastated by yellow fever, eleven out of fifty-four inhabitants having died by the 15th instant.

QUERIES AND REPLIES.

Falling Hair.

MR. EDITOR:—In REPORTER, Sept. 11, J. W. M. asks: "What will prevent the falling of hair?" I have used, for the past ten years, in my own case, and prescribed frequently for others, the following, with complete satisfaction:—

R.—Glycerine, aa ounce ij
Tinct. capsicum, drachm j. M.
Oil of bergamot,

Or perfume to suit.

This is to be the only dressing for the hair. Wash the head occasionally with soft water and fine soap.
Iowa. W. L. L., M. D.

Stomatitis Materna.

"According to my experience, any of the sulphites, particularly the sulphite of soda, will have a better and more permanent effect on that fermentative condition than any remedy I have ever prescribed. I have used it, to the entire exclusion of all others, with the very best results, allowing the child to continue at the breast. Any of the great number of empirical remedies, such as borax, ginger, nit. silver, and carbolic acid, will seem to do good after nursing the suckling."

Gallatin, Tenn.

H. B. MALONE, M. D.

Dr. J. M. O. B., of Ohio.—"Can your readers furnish a recipe for preserving eggs in hot weather?"

Reply.—A coat of collodion is said to be efficient.

MARRIAGES.

HAIGHT-PULLAN.—August 31, at the residence of the bride's parents, by the Rev. J. Haight, Dr. J. B. Haight, son of the officiating minister, and Miss Lizzie Pullan, daughter of R. B. Pullan, Esq., all of Cincinnati.

LITCH-GERKEN.—August 3, 1875, in Norfolk, Va., by the Rev. Otto S. Barten, D.D., rector of Christ Church, Wilbur F. Litch, M.D., of Philadelphia, and Miss Annie L. Gerken, of Norfolk, Va.

DEATHS.

BASSETT.—At Warren, Litchfield County, Conn., on Saturday, 4th inst., after a brief illness, Benjamin F. Bassett, M.D., formerly of Brooklyn, N. Y., in the 50th year of his age.

HOUSEMAN.—On the 7th inst., Dr. William W. Houseman, son of John A. and Sarah Houseman, of this city, in the 22d year of his age.

KNIGHT.—On the 9th inst., at the residence of her uncle, 1811 Fairmount avenue, Mrs. Marie L. Knight, wife of S. R. Knight, M.D., superintendent Episcopal Hospital.

RUMSEY.—On Sunday, the 5th inst., at Fishkill, on Hudson, Charlotte A. Rumsey, daughter of the late Dr. James S. Rumsey.

LENTZ.—On the 30th ult., at Chestnut Hill, Susan Sheaff, wife of Dr. Henry S. Lentz, in the 56th year of her age.

WATTS.—On Saturday, 5 P. M., of consumption, Henrietta Tibbals, wife of Dr. J. H. Watts, aged 41 years.

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Under the direction and personal supervision of

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Instrument Maker to St. Luke's, Mt. Sinai, New York State Woman's Hospitals, Bellevue, and all the other New York City Hospitals,

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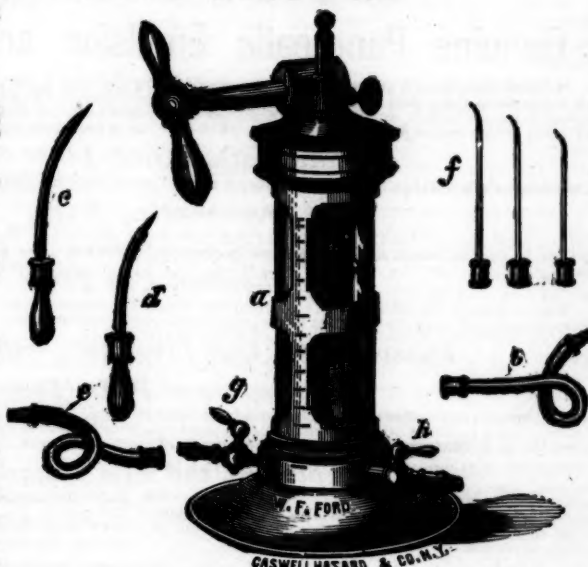
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Special attention given to the Manufacture of Instruments to order, in exact accordance with patterns furnished by surgeons and physicians.

If desired, Mr. Ford will give his personal attention to the application of Trusses and Appliances for building up the human frame.



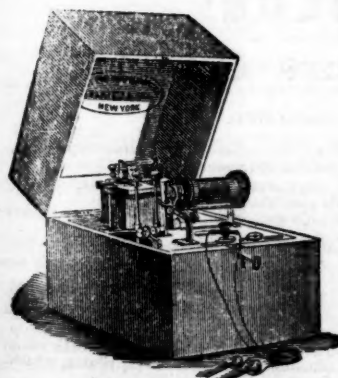
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SAVORY & MOORE'S

Genuine Pancreatic Emulsion and Pancreatine.

In Diseases where Wasting, Loss of Power of Digestion and Assimilation are prominent symptoms, the Pancreatic Emulsion and Pancreatine are the most potent Remedial Agents. When Cod-liver Oil fails to increase weight, or cannot be tolerated by the stomach, the Pancreatic Preparations are the only remedies which can supply its place and give the power of digesting the Oil.

Pancreatized Cod-Liver Oil.

A reliable combination of Pancreatine with the Oil, rendering its digestion easy and rapid.

Pancreatine Wine.

For the digestion of Cod-Liver Oil, solid Fat, and Food generally. The Wine and Cod-Liver Oil readily form an Emulsion, when shaken together in equal proportions.

Phosphorized Cod-Liver Oil.

The increased demand for this preparation since its introduction by Messrs. SAVORY & MOORE, six years ago, would seem to stamp it as an important therapeutic remedy.

Phosphorized Cod-Liver Oil, with Quinine.

Phosphorus Pills (Pure),

Of all sizes and strengths, non-resinous and perfectly soluble. Most of the uncertainty of operation experienced in the internal administration of Phosphorus, may be traced to the use of Oxydized, or Allotropic Phosphorus, preparations which are less active, and more uncertain.

Peptodyn, the New Digestive,

Digests all kinds of Food—the Farinaceous, Fibrinous, and Oleaginous—being a combination of the several active principles of the digestive secretions, Peptic, Pancreatic, etc.

Five grains of Peptodyn (Powder) digests—100 grains of Coagulated Albumen, 100 grains of Fat, 100 grains of Starch.

BEST FOOD FOR INFANTS,

As Supplied to the Royal Families of England and Russia.

Feeding Infants with the best, i.e., the most nourishing and easily digested Food, has recently occupied much of the attention of the Profession, and the fallacy and danger of employing Starch, in the form of Corn Flour and other high-sounding titles, has been repeatedly pointed out.

This food resembles Mother's Milk more closely than any other kind, perfectly fulfilling its object, that of promoting the GROWTH and HEALTH of the Child.

Datura Tatula, for Asthma and Chronic Bronchitis.

Recommended by the Profession as a remedy of great power and usefulness in cases of short and difficult breathing, spasmodic coughing, etc. Grown by SAVORY & MOORE, and prepared in all forms for smoking and inhalation.

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MATHEY-CAYLUS'

Gluten Capsules of Pure Copaiba,

AND OF THE FOLLOWING COMBINATIONS:

Copaiba and Cubebs; Cop. and Citrate of Iron; Cop. and Rhatany; Cop., Cubebs, and Rhatany; Cop., Cubebs, and Carbonate of Iron; Cop., Cubebs, and Alum; Cop. and Magnesia; Cop. and Catechu; Cop. and Subnitrate of Bismuth; Cop. and Tannic Acid; Cop. and Tar; Cop., Peppine, and Bismuth; Cubebs pure; Cubebs and Alum; Cubebs and Turpentine; Cubebs and Tannate of Iron; Venice Turpentine; Norway Tar; Cop. and Sandal Wood Oil; Cop., Cubebs, and Sandal Wood Oil; Cop., Iron, and Sandal Wood Oil.

Mathey-Caylus' Capsules, introduced into the U. S. in 1853, have achieved a decided success, on account of the great care taken in their preparation, and of their universal efficacy. They present the most perfect mode for administering Copaiba, Cubebs, Tar, Turpentine, and other remedies, the disagreeable odor and taste of which are often a hindrance to their use. Being formed of a thin, transparent, and readily assimilated coating, they so cover and disguise the medicine to be given, that it can be taken with ease, and they offer the special advantage of never causing nausea, eructations, or dyspeptic symptoms, which are complained of by many persons using other preparations. For sale by Druggists generally.